## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

TESJ.0029

0

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			22				ľΓ	RATE FEE		l I	RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	ΛP	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			∂∂minus 20=		*	2		X\$ 9=		OR	X\$18=	36.0
INDEPENDENT CLAIMS			/ minus 3 =		*	D		X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				[	+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	L	TOTAL	<u>-</u>	OR	TOTAL	746
	C	LAIMS AS A	MENDED - PART II					i		,	OTHER	
		(Column 1)	(Column 2			(Column 3)	<u> </u>	SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	·Spris	Minus	· **		=		X\$ 9=		OR	X\$18=	. 1
	Independent	NITATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT FEE	1.2
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST APPL											4.1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	<b>.</b>	Minus	**		=		X\$ 9=		OR	X\$18=	. * (
	Independent	*	Minus /	***		=	] [	X40=		OR	X80=	· · · · ·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405			070	
	•							+135= TOTAL		OR	+270= TOTAL	
							A	DDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	11	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405			070	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	• 1
**	If the "Highest Nu	mber Previously Particular Previously P	aid For" IN THI	S SPACE	is less tha	n 20, enter "20		TOTAL DDIT. FEE		OR	TÖTAL ADDIT. FEE	`
		nber Previously Pa						nd in the app	ropriate box	in col	lumn 1.	